

**CALIFORNIA STATE FIRE MARSHAL
FIRE ENGINEERING DIVISION
COMPLAINT REPORT**



MAIL TO:

California Department of Forestry & Fire Protection
Office of the State Fire Marshal
Fire Engineering Division
P.O Box 944246
Sacramento CA 94244- 2460

FAX No: (916) 445-8473

To: _____

From: _____ Fax: _____

PROGRAM

- ☐ Portable Fire Extinguishing Systems
- ☐ Automatic Extinguishing Systems
- ☐ Fireworks
- ☐ Flame Retardant
- ☐ Building Materials and Listing

1. Reporting Party:

Date:

2. Representing:

3. Address:

4. Telephone Number:

5. Victim's Name:

6. Address:

7. Telephone Number:

8. Complaint Against:

9. Address:

10. Telephone Number:

11. SFM License Number (if any):

12. Date of Incident:

13. Incident: (Use addition pages if necessary)

14. Signature of complainant

Attachment: